# Pursue Reform Not According to Party, but by Adherence to Certain Principles

As a physician from Tennessee who has delivered babies for over 30 years, I have seen our healthcare system change dramatically. Some people said I must have gone off my meds when I decided to run for Congress, but having extensive experience as a physician enables me to lend my experience to the debate over health reform in Washington.

I was part of a medical group with 70 physicians and 350 staff, and we&rsquo;ve lived through many attempts at reform at the national and state levels. Some may recall that in the early 1990s, managed care was pitched to physicians and the public as the cure for an ailing healthcare system, but all it managed to do was move revenue from providers and patients to insurance companies and third-party payers, and not decrease costs as advertised. It serves as a cautionary tale for anyone who would believe there&rsquo;s a silver bullet out there for what ails our system today.

In medicine, there&rsquo;s no such thing as a Republican disease or a Democratic disease &mdash; there&rsquo;s just disease; likewise, good ideas on healthcare reform shouldn&rsquo;t be defined by a party, but by meeting a series of principles for reform. Since arriving in Washington, I&rsquo;ve listened to people from all sides of the political spectrum and have developed a few principles that I believe healthcare reform must encompass:

&bull; Above all, do no harm.

A doctor&rsquo;s Hippocratic Oath should be applied to any reform considered. While many have focused on what&rsquo;s wrong with the current system, there&rsquo;s still a lot that is right. Eighty-five percent of Americans today have health insurance and for the vast majority of them, the system works. They go in and see their doctor, who in turn diagnoses them and sends them home with a prescription or remedy that addresses the problem. When Washington tries to &ldquo;fix&rdquo; our healthcare system for one person, I want to make sure the result isn&rsquo;t a downgrade of care for three others.

&bull; Doctors and patients should make medical decisions.

I prefer a system with private health
insurers, who ultimately do a better job of putting decision-making authority
in doctors&rsquo; and patients&rsquo; hands. The problem with publicly operated health
insurance (the new way of saying &ldquo;government-run healthcare&rdquo;) is that care must
be rationed to meet the budget. Consider that here in America, the five-year
survival rate for breast cancer has increased from 50 percent to 98 percent,
largely because of education, early diagnosis and sophisticated medical
treatment.

But in England, which has a national health system, they&rsquo;re no longer covering
mammograms because too many false positives resulted in more costly biopsies
being performed. While it&rsquo;s less costly to wait for a lump to develop, no
American in their right mind would think this is a reasonable approach to
providing care.

But these are the choices that have to be made in a public health plan funded
with taxpayer dollars.

&bull; Every American should have access to health
insurance.

We should be able to agree that all Americans
should have access to a basic benefits package that makes sure they are covered
when they go to the doctor&rsquo;s office or hospital. This isn&rsquo;t Rolls-Royce
coverage that includes cosmetic surgery, hair transplants or fertility
treatments, but basic benefits.

&bull; Healthcare costs shouldn&rsquo;t bankrupt you.

Basic catastrophic coverage will prevent many
individuals from being wiped out when they get cancer or a life-threatening
illness. We had a good start when we coupled health savings accounts with
high-deductible health plans. I&rsquo;d like to see more done to move plans in this
direction. I recently was helping a woman who worked in a local nursing home
who was without health insurance and discovered she had lymphoma. What little
money she had been able to save would soon be gone and then some to pay for her
treatment. A low-cost catastrophic policy would prevent this from happening

&bull; Health coverage should be portable.

Individuals who get sick often feel trapped in their current job because if
they chose to leave their job, their health insurance would be terminated,
along with their protection against pre-existing conditions. We need some
changes to how individuals purchase their insurance so that if your job ends &mdash;
by choice or by layoff &mdash; you won&rsquo;t find yourself without the ability to afford
treatment.

&bull; To lower costs, everyone should have &ldquo;skin
in the game.&rdquo;

Study after study proves that when care is free, it is over-utilized. In
Tennessee under TennCARE (our state&rsquo;s Medicaid plan), we saw firsthand that
when patients got a cold, instead of simply going to the local drugstore and
buying some cold medicine, they went to the doctor for a prescription so the
cold medicine was free. Some argue that this is illogical or an anomaly, but
the fact is, it&rsquo;s a logical, rational decision &mdash; they saved money by going to
the doctor and getting a prescription.

Everyone has a lot at stake in this debate, and
there are many good ideas that deserve debate and a thoughtful vetting. I am
hopeful if we come together to agree on a framework like what I&rsquo;ve described,
reform is possible. Then it will be incumbent on all of us to commit to getting
it done &mdash; not fast, but right. Too much is at stake to fail